



“Data Quality Tools You Can Use” (Part 2)

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Objectives

- Explain Visit Workload vs Encounter Services
- Overview of ADM Features
- Interface Error Reports
- Coding Table Update Coordination
- SADR Review Tool - DO “Tune-Up”



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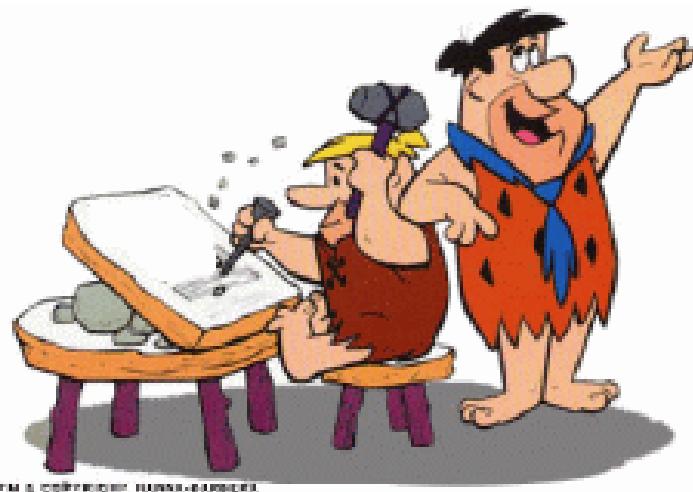


First There Was ...





The “Bubble” Sheet...





No More Bubble Sheets...

CHCS - Persona

PERSONA™

Disconnect Edit Commands Print Hold Security Help

ADM Patient Encounter

QQQBraggTESTB, CHILDGLOBAL 02/000-00-0094 AGE:7y

Appt Date/Time : 07 Dec 2005@1102 Type: WELL\$ Status: WALK-IN
Clinic: WAMC PEDS MEPRS: BDAA Injury/Accident Related: No
In/Outpatient: Outpatient APV: No Pregnancy Related: No
Appt Provider: CHESNEY, URSULA Appt Prov Taxonomy: 208000000X
Appt HCP Role: 1 ATTENDING
Additional Providers: No
Disposition: RELEASED W/O LIMITATIONS

=====

ICD-9 Dx Description

V72.0 EXAMINATION OF EYES AND VISION

=====

Chief Complaint: V72.0 EXAMINATION OF EYES AND VISION

Help = HELP Exit = F10 File/Exit = DO

INSERT OFF

Key elements associated with the CHCS Visit, not updatable in ADM

Only Encounter elements in reverse video can be updated in ADM

Enter data in ADM with INSERT OFF



And Now...

USER, TEST: Military Clinical Desktop - Encounters (Privacy Act of 1974/FOUO) - Training System

Date: 09 Nov 2004 0930 EST Status: In Progress MTF: CHCSII ITT Facility
Primary Provider: USER, TEST Type: ACUT\$ Clinic: CHCSII ITT Clinic
Patient Status: Outpatient

Reason for Appointment: cough & fever HTN followup
Appointment Comments: middle age illnesses/perimenopause

AutoCites Refreshed by USER, TEST @ 02 Dec 2004 2306 EST

Problems	Active Family History	Allergies
• ESSENTIAL HYPERTENSION • METRORRHAGIA • IRON DEFICIENCY ANEMIA	No Active Family History Found.	No Allergies Found.

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
AMLODIPINE (NORVASC) 5MG-PO 5MG TAB	Active	QD	6 of 6	Not Recorded
HCTZ (ESIDREX/ORETIC)-PO 25MG TAB	Active	QD	6 of 6	Not Recorded
FERROUS SULFATE-PO 325MG TAB	Active	1 QD	6 of 6	Not Recorded

CPG Autocites

Hemoglobin A1c (Diabetes CPG) (Goal: <8)	6 Jun 2004 8.3 mg/dl	14 Apr 2004 8.9 mg/dl	21 Jan 2004 8.7 mg/dl
LDL (Diabetes CPG, Hyperlipidemia CPG) (Goal: <100)	14 Apr 2004 114 mg/dl		

Screening Written by USER, TEST @ 02 Dec 2004 2318 EST
Reason For Appointment: cough & fever

Vitals Written by USER, TEST @ 02 Dec 2004 2334 EST
BP: 122/66, HR: 72

S/O

A/P Written by USER, TEST @ 03 Dec 2004 1027 EST
1. Patient Counseling: Adequate Calcium Counseling Complet
Laboratory(ies): HGB A1C (Routine); LIPID PAI

AHLTA logo (AHLTA in red and blue inside an oval with stars)



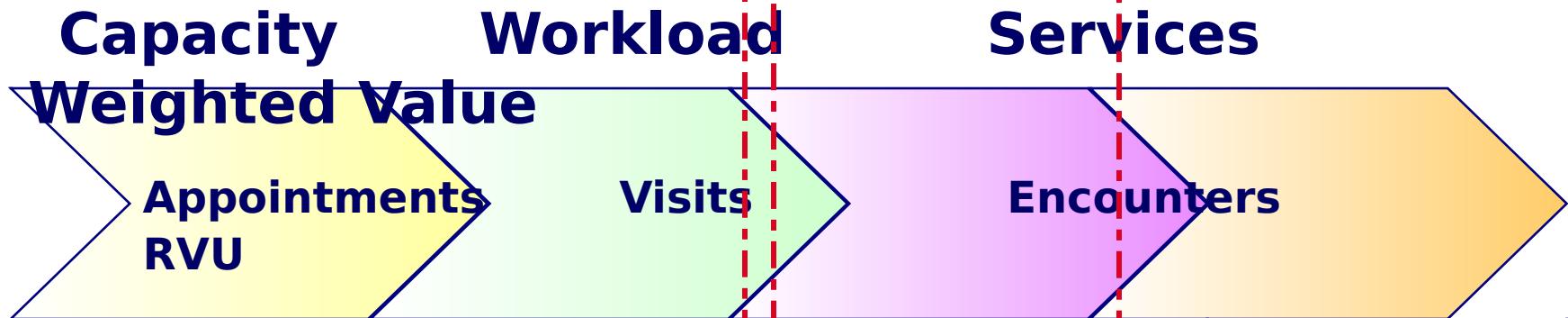
Why the Focus?

- Standardize data collection methods
- Compare workload and productivity
- Measure efficiency per Provider FTE
- Forecast demand for services
- Establish performance benchmarks
- Identify trends and utilization
- Calculate costs of services
- Assess and improve quality of services





Measuring Performance



- Planned
- Frozen
- Open
- Booked

- Kept
- Walk-In/Sick-Call
- T-CONS
- No-Show
- Cancelled (Patient)
- Cancelled (MTF)
- Cancelled (TOL)
- Occ-Svc
- ADMIN

- Open (Not Coded)
- Complete
- LWOBS
- Population Risk
- Outcomes
- Practice Profile
- Quality of Services

- Simple RVU
- Average RVU/Encounter
- RVU/Provider FTE/Day
- Prospective Payment System (PPS) RVU
- EAS RVU (Facility)

Focus Shifting from “Counting Visits” to Measuring Work/Services Provided



Encounter Services



- **ICD-9 Code - Why the Patient was seen?**
 - Chief Complaint and Diagnoses
- **CPT Code - What was done to address the patient problem?**
 - Physician/Provider Services
 - Procedures Performed and Units of Service
 - Modifiers (explain additional details about the Service or Procedure)
- **HCPCS Code - What services/supplies were provided?**
- **Evaluation & Management Code (CPT Code):**
 - Setting
 - Office, Inpatient, Emergency Room, Preventive Service, Consult, etc.
 - Level of Services
 - Complexity (Minimal, Low, Moderate, or High)
 - Age Band
 - Preventive Services only



Visits vs Encounters

- **An “ENCOUNTER” = Services Provided**
 - Documents reason for seeking care
 - Captures medical services provided
 - Establishes level of professional service and decision making
 - Identifies Staff (By Name) providing the services
 - Provider Seen
 - Secondary Providers
 - Both COUNT and NON-COUNT Visits are Encounters
- **A Count Visit is Always an Encounter, but not all Encounters meet the MEPRS definition of a Visit for reporting in WAM/EAS IV, EAS “Eligible” Encounters and Worldwide Workload (WWR)**
- **DQMC Statement 8. a) - # SADR encounters / # WWR visits**
 - # SADRS should always be equal to or greater than Visits



PENDING vs PENDING

- **PENDING “Visit” Status: (Bad...)**
 - Incomplete Workload
- **PENDING “SADR” Status: (Good...)**
 - Encounters Coded as Complete or Updated, that pass SADR Edits, will be included in the next daily SADR batch file, grouped by Treating DMIS
 - SADR Nightly process is tasked to run ~2130 each night, in CHCS
 - Includes ADM & AHLTA completed encounters
 - Includes ADM, AHLTA and CCE Updates



Basic Features

- **Standard Coding Look-Up Tables:**
 - ICD-9 (including Military Unique Codes)
 - CPT/HCPCS
 - Modifiers (CHCS Modifier Mapping Table - KG ADS MODIFIER)
- **Clinic Favorites Coding Lists**
- **Each patient encounter must contain:**
 - 1 Diagnosis Code
 - 1 E&M (or “99499” entered as a “Placeholder”)
- **Secondary Providers**
 - Supervising, Attending, Paraprofessional, Assisting, GME, Operating Provider, Surgeon, Anesthesia and Nurse
- **Creates Admission, Daily & Disposition RNDS* Encounters to capture Inpatient Attending Provider Professional Services**
 - Industry Based Workload Alignment (IBWA)
- **AHLTA encounters “Written-Back” to ADM**
 - When encounter is signed as “Complete”, Updated and Co-Signed
- **Encounters Reviewed as “Complete” in the CCE update ADM**

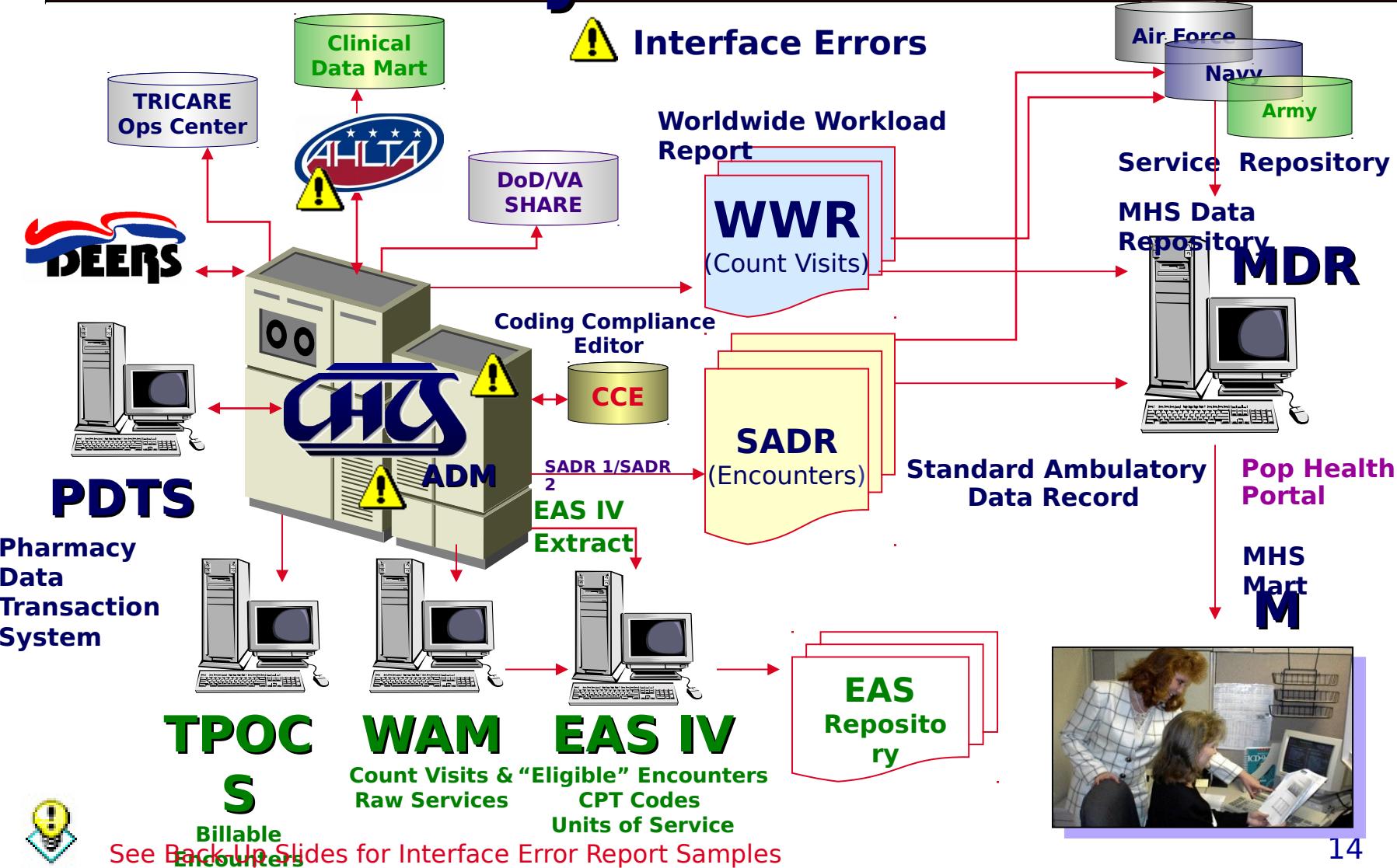


Additional Features

- **HIPAA Standard elements:**
 - Cause of Injury (and associated elements)
 - Geographic Location of Injury (Motor Vehicle Accidents)
 - Pregnancy Related (and associated elements)
- **Additional E&M Codes (up to 2 Additional E&M Codes)**
- **Diagnosis Code Priority (Links Procedure to Dx)**
- **CPT Code Units of Service (per CPT Code)**
- **CPT Code Modifiers (up to 3 - per CPT Code)**
- **Military Unique ICD-9 Codes (ICD-9 Code Extenders)**
 - V70.5 4 PRE-DEPLOYMENT EXAMINATION
 - V70.5 5 DURING DEPLOYMENT EXAMINATION
 - V70.5 6 POST-DEPLOYMENT EXAMINATION
- **Encounter Disposition (Inpatient and Ambulatory)**



Data, Data Everywhere...





Interface Status Reports

1. ADM Interface Error Report

- CHCS ADM Menu Option Report #5
- Errors – Encounter failed SADR edits – Not sent to CCE
- Warnings – May impact TPOCS encounter data
- Supervising Provider Warnings – Will now be sent to EAS

2. CCE Detailed Interface Error Report

- CHCS Menu Option within ADM System Manager Menu Option
- Report of CCE functional errors
- ADM not updated to generate updated SADR
- Billable encounters not available to submit for billing

3. AHLTA/ADM Write-Back Error Report

- Coordinate with your AHLTA System Admin to run the report
- May require MHS Trouble Ticket to obtain report
- ASCII File of AHLTA Write-Back errors
- AHLTA encounter not accepted or received by ADM
- SADR not created
- Encounter not sent to TPOCS, CCE or EAS
- Impacts 3-Day Coding Compliance DQ Measure



ADM Reports Menu

Type ADS to access the Ambulatory Data Module

STYL	User Prompt Style
1	Appointments with No ADM Records by Clinic
2	ADM Patients with 3rd Party Insurance
3	ADM Compliance Report
4	ADM Records with Unresolved Coding Issues
5	Interface Transmission Status of ADM Record
6	Encounter Summary Report by Clinic/Provider
7	For Clinic Use Only Report
8	Encounter Specific Code Report by Clinic/Provider
9	Top Number Encounter Report
10	Appointment/Encounter Count Report
11	Patient Encounter Records Report

Detailed “How To” run the ADM Compliance Report

<http://www.pasba.amedd.army.mil/Quality/Resources/ADMComplianceReportInstr031215.pdf>



Compliance Report (IBWA)

ADM Report #3

Select PAD System Menu Option: ADS Ambulatory Data Module
Select Ambulatory Data Module Option: 2 Ambulatory Data Reports
Select Ambulatory Data Reports Option: 3 ADM Compliance Report
Select (D)MIS ID, (U)ser current division as filtering type or (Q)uit: U// D
Select (O)ne, (M)ultiple, (A)ll DMIS ID or (Q)uit: A// 0
Select DMIS ID: 0089 0089 WOMACK AMC
Select (C)linic, (P)rovider as primary sort or (Q)uit: C// C
Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A// M
+* ADMISSIONS EKAA
* AMIC CL BIAB
Summarize by provider (Y)es, (N)o, or (Q)uit: Y// N Y// N
Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C//
Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit: A// A
Include inpatient admitted by another service (Y)es, (N)o, or (Q)uit: Y// Y
Select (C)ount, (N)on-Count, (E)rror non-count, (B)oth as workload type
or (Q)uit: B// B
Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S// M
Enter Month & Year: Apr 2006// (Apr 2006)
Do you want to proceed with this report? No// Y
Select DEVICE: Q
Select DEVICE: SP00L

- **Select EKAA for IBWA RNDS* Encounters and one other Clinic**
- **Choose “No” to Summarize by Provider**



ADM Compliance Tracker

ADM Compliance Report for Jan 07 (Cumulative)					
Commander's Goal = 95% ----- MEDCOM Standard = 100%					
Work Days	DATE	PAS	COMPLETE	INCOMPLETE	%
		TOTAL	ADM	ADM	COMPLIANT
1	ADM Report for 3 Jan	2,790	2,632	158	94.34%
2	ADM Report for 4 Jan	3,628	3,464	164	95.48%
3	ADM Report for 5 Jan	3,314	3,170	144	95.65%
4	ADM Report for 8 Jan	3,369	3,111	258	92.34%
5	ADM Report for 9 Jan	3,540	3,325	215	93.93%
6	ADM Report for 10 Jan	2,561	2,453	108	95.78%
7	ADM Report for 11 Jan	3,588	3,456	132	96.32%
8	ADM Report for 12 Jan	555	527	28	94.95%
9	ADM Report for 16 Jan	3,645	3,491	154	95.78%
10	ADM Report for 17 Jan	2,904	2,783	121	95.83%
11	ADM Report for 18 Jan	3,349	3,233	116	96.54%
12	ADM Report for 19 Jan	3,269	3,105	164	94.98%
13	ADM Report for 22 Jan	3,517	3,360	157	95.54%
14	ADM Report for 23 Jan	3,534	3,412	122	96.55%
15	ADM Report for 24 Jan	2,844	2,762	82	97.12%
16	ADM Report for 25 Jan	3,504	3,390	114	96.75%
17	ADM Report for 26 Jan	3,176	3,086	90	97.17%
18	ADM Report for 29 Jan	3,459	3,338	121	96.50%
19	ADM Report for 30 Jan	3,581	3,424	157	95.62%
20	ADM Report for 31 Jan	2,945	2,882	63	97.86%
Grand Total:		63,072	60,404	2,668	95.77%
DAILY AVERAGE:		3,154	3,020	133	95.77%
NOTE: There were 20 "work" days in Jan 07					



IBWA % Compliance

- **Generate the ADM Compliance Report**
 - # Completed IBWA Encounters
- **Generate the WWR to calculate**
 - # OBDS
 - # Dispositions



07 Feb 2006@1441		For Official Use Only Ambulatory Data Module			Page	1
ADM Compliance Report by Clinic From: Dec 2005 Thru: Dec 2005						
Clinic		PAS Total	Complete ADM Total	Incomplete ADM Total	1	Compliance
0089	EKAA IBWA CLINIC 0089	3000	2900	100	97	
0089	BAA0 INTERNAL MEDICINE-OBS	1	1		100	
<hr/> Grand Total		3001	2901	100	97	



Coding Table Updates

- **ICD-9 - Updated per Fiscal Year (Effective 1 Oct 06)**
- **CPT/HCPCS - Updated per Calendar Year (Effective 1 Jan 07)**
- **ADM only maintains CURRENT YEAR Code Tables**
- **Downstream Impacts:**
 - Prior year codes not available for prior year encounters in ADM
 - CCE supports the use of correct codes, based on Date of Service, but the “correct” codes will be rejected by ADM
 - AHLTA Provider/Clinic maintained templates will allow obsolete codes to be selected, but will be rejected by ADM impacting 3 Day Coding Compliance
- **Establish a Code Table Update/Synchronization Plan!**
 - Plan/Discuss Code Table Update synchronization with AHLTA, CHCS, TPOCS, CCE, EAS, and any other system affected...
 - Identify planned release and install dates for each system
 - Identify any coding backlogs (ADM, AHLTA & CCE) potentially impacted
 - Ensure “Review Complete” status in CCE for all billable encounters
 - Document the Update/Install Date for each system for future reference



The “99499” Placeholder

- June 2005 - E&M Code became optional for APV and encounters when at least 1 CPT/HCPCS Code was entered
- June 2005 - E&M Code was no longer required for Non-Count Visits
 - Remember! - IBWA RNDS* are NON-COUNT Visits
- Current recommendation is to continue to enter the “99499” E&M Code Placeholder in ADM
 - TPOCS still requires the “99499” Placeholder



Encounter Data “Tune-Up”





Show Me the Data!

3 - TOTAL SADR ENCOUNTER DETAIL : Select Query

	APPT_PREFIX	APPT_IEN	SADR_STAT	SADR_DATE	APPT_	E_M_CODE	CPT1_CODE	CPT1_LEVEL	CPT2_CODE	CPT2_LEVEL	CPT3_CODE	CPT3_LEVEL	CPT4_CODE	CPT4_LEVEL
▶	2	14679519	R	20060127	1	99212								
◀	C	14599779	R	20060127	1	99222								
◀	C	14702113	R	20060127	3	99499	99024	1						
◀	C	14702115	R	20060127	3	99499	99024	1						
▶	2	14701846	R	20060127	6	99499								
◀	C	14687291	R	20060127	1	99284	36415	1	99001	1	36000	1	90760	1
▶	2	14694400	R	20060127	3	99499	90471	1	90657	1				
◀	2	14702009	R	20060127	3	99499	98150	1	90899	1				
◀	C	14680397	R	20060127	1	99499	42826	1	00170	1	99199	1		
◀	C	14692475	R	20060127	1	99283	93005	1	J8499	1				
▶	2	14638448	R	20060127	1	99499	97535	3						
◀	C	14702110	R	20060127	3	99499	99024	1						
◀	C	14702121	R	20060127	3	99499	99024	1						
◀	C	14599555	R	20060127	1	99499	42826	1	00170	1	99199	1		
▶	2	14701117	R	20060127	3	99213	59025	2						
◀	2	14677432	R	20060127	1	99211								
◀	C	14692435	R	20060127	1	99283	36000	1	90760	1	J7030	1	90774	1
◀	C	14702130	R	20060127	3	99211								
▶	2	14675156	R	20060127	1	99499	99024	1						
◀	C	14689855	R	20060127	1	99282	29130	1						
▶	2	14700161	R	20060127	3	99211								
◀	C	14702117	R	20060127	3	99499	99024	1						
▶	2	14702253	R	20060127	6	99499								
◀	2	14677982	R	20060127	1	99215								
◀	C	14702095	R	20060127	3	99211								
◀	C	14687326	R	20060127	1	99282	99070	1	E0110	1				
◀	C	14702098	R	20060127	3	99499	99024	1						
▶	2	14701826	R	20060127	6	99499								
◀	C	14702101	R	20060127	3	99499	99024	1						
▶	2	14702249	R	20060127	6	99371								
◀	C	14659632	R	20060127	1	99212	59025	1	76815	1				
◀	C	14687301	R	20060127	1	99283	E0110	1	99070	1	J8499	1		
▶	2	14629949	R	20060127	1	99499	97535	2	97150	2	97035	2		
◀	C	14692429	R	20060127	1	99284	36415	1	99001	1	36000	1	90760	1
▶	2	14691534	R	20060127	3	99213								



SADR Data Review Tool

- **Import Daily SADR extracts:**
 - Excel Macro parses SADR file by DMIS
 - SADR SHOOTER.mdb
- **Copy/Paste into Excel Workbook**
- **“Ready Data” for your “DQ Radar”**
- **Identify trends for user feedback and training**
- **Supports DQ Process Improvement**
- **“Drill Down” into specific problem areas**
- **Create encounter data reconciliation lists for Clinic Staff**



See Notes View for additional “How To”
information



DQ “Check Points”

- Allied Health Coding (PT/OT, Audiology, Mental Health, Optometry, etc.)
 - MTFs will be decremented for incorrect Allied Health E&M Coding!
- E&M Coding for Nurses and Technicians
 - Important Training Issue for Nurses and Technicians with RN Wellness Role in AHLTA
- E&M Distribution:
 - By Provider
 - By 4th Level FCC
 - New vs Established Encounters
 - Sick vs Well Encounters
 - New vs Consult Encounters
- Diagnosis Capture (Frequency and Tabular Lists)
- Procedures/Services and Supplies
- Updated Encounters
 - Also review CCE Coder/Provider Comparison Report
- Provider Medical Specialty (Direct Care <=905)



Allied Health Locations

E&M Distribution		Allied Health Metric											
Count of APPT_IEN	MEPRS	SADR STATUS	E M CODE	99205	99211	99212	99213	99215	99402	99403	99404	99456	Grand Total
BALA	R				1				1	1	1		4
BFBA	R				2		1		2				5
BFBB	R					1			2				3
BFE2	R								2				2
BFEA	R				1		2						3
BFEB	R				10	2	9	1	7		1		30
BFEO	R				2	1		3					6
Grand Total				13	6	13	1	16	1	1	1	1	53
FCC		DESCRIPTION											
BEB		Cast Clinic											
BFB		Psychology Clinic											
BFC		Child Guidance Clinic											
BFD		Mental Health Clinic											
BFE		Social Work Clinic											
BFF		Substance Abuse Rehab Clinic											
BHC		Optometry Clinic											
BHD		Audiology Clinic											
BHE		Speech Pathology Clinic											
BLA		Physical Therapy Clinic											
BLB		Occupation Therapy Clinic											

- **Allied Health Locations should not have E&M Services**
- **CPT Codes for procedures performed by Allied Health Providers identify the Professional Services provided**
- **Prepare reconciliation list for Clinic Staff**



E&M By Specialty

Specialty Distribution															
SADR_STATUS	R														
Count of APPT_IEN	E_M_CODE														
HCP_SPEC	99201	99202	99203	99204	99205	99211	99212	99213	99214	99215	99241	99242	99499		
600		4	16	1		1	383	143	11	14	32		630	1235	
703						11	7	23	1			12		660	714
704														607	607
705												2		415	418
706							4	5			4			1667	1681
709							4	5						484	493
900						1249	74	33		1	3	11	4406	5777	
958							250	45	14	51	3	11	17	17	
Grand Total		4	16	1									8886	10942	

- RNs (600)/Techs (900) with Physician Level E&M Services
- Prepare Reconciliation List for Clinic Staff
- Provide Option to correct in either AHLTA or ADM
- Click on any cell to display detailed data for review



Drill Down Reconciliation

PREFIX	APPT_IEN	SADR_STATUS	SADR_DATE	APPT_REC_STATUS	TYPE	E_M_CODE	CPT1_CODE	CPT1_LEVEL	CPT2_CODE	CPT2_LEVEL	CPT3_CODE	CPT3_LEVEL	CPT4_CODE	CPT4_LEVEL	TX_DMIS	ENC_DATE	ICD1	
2	15361352	R	20060731	C	3	99205										0089	20060720	V61.10
2	15338134	R	20060726	C	3	99205										0089	20060714	V61.10
2	15311698	R	20060708	C	3	99205										0089	20060707	V61.10
2	15301620	R	20060707	C	3	99205										0089	20060705	V61.10
2	15302940	R	20060712	C	1	99205										0089	20060707	V61.10
2	15302966	R	20060710	C	1	99205										0089	20060710	V61.10
2	15265427	R	20060707	C	1	99205										0089	20060626	V61.10
2	15286443	R	20060707	C	1	99205										0089	20060629	V61.10
2	15277008	R	20060706	C	1	99205										0089	20060629	V61.10
2	15265410	R	20060705	C	1	99205										0089	20060626	V61.11
2	15371244	R	20060726	C	3	99211	90801	1								0089	20060724	995.53
2	15294406	R	20060713	C	1	99211										0089	20060711	V61.12
2	15382308	R	20060726	C	3	99212	90804	1								0089	20060726	V61.0
2	15338066	R	20060715	C	3	99212										0089	20060714	V61.10
2	15386595	R	20060730	C	1	99212	90801	1								0089	20060728	V61.11
2	15386024	R	20060730	C	1	99212	90801	1								0089	20060728	V61.12
2	15382540	R	20060727	C	1	99212	96150	1								0089	20060727	V61.0
2	15382491	R	20060727	C	1	99212	90801	1								0089	20060727	V61.0
2	15372496	R	20060727	C	1	99212	90801	1								0089	20060726	V61.12
2	15368538	R	20060725	C	1	99212	90801	1								0089	20060724	V61.11
2	15283542	R	20060711	C	1	99212	90801	2								0089	20060630	V61.10
2	15135746	R	20060721	C	1	99213										0089	20060519	917.0
2	15397888	R	20060731	C	3	99215										0089	20060731	V61.9
2	15338135	R	20060726	C	3	99215										0089	20060714	V61.21
2	15250240	R	20060725	C	3	99215	90806	1								0089	20060619	V61.10
2	15325932	R	20060725	C	1	99215										0089	20060721	V61.20
2	15268404	R	20060725	C	1	99215	90806	1								0089	20060623	V61.9
2	15286461	R	20060707	C	1	99215										0089	20060629	V61.11
2	15298024	R	20060706	C	1	99215										0089	20060706	V61.0
2	15288447	R	20060711	C	1	99456	90801	2								0089	20060706	V61.9

- **Copy the APPT_IENs**
- **Prepare CHCS Query File to identify patient encounters for reconciliation**
 - (` Grave Key in front of APPT_IEN)
- **Access CHCS Fileman-> Inquire to File->Patient Appointment**
- **Paste the APPT_IEN (with Grave Key) into the CHCS Patient Appointment File**
- **Select your favorite CHCS Print Template or use the PT ID EXTRA**



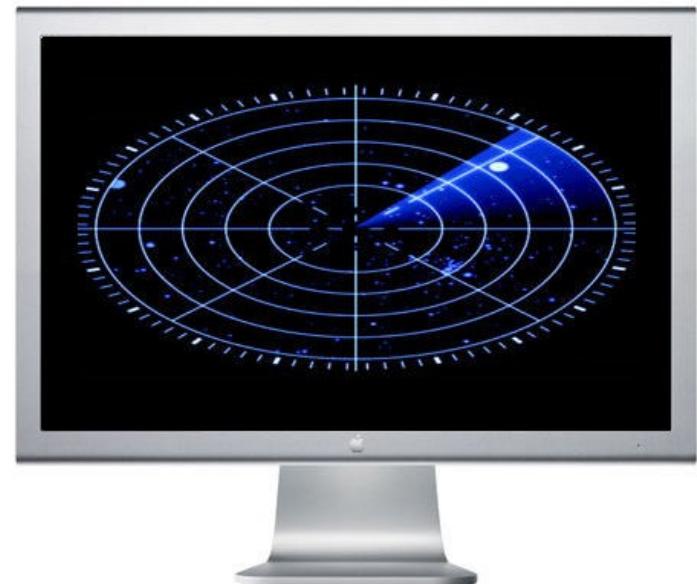
CHCS Ad-Hoc Query

```
NAME: GS CCC PT ID EXTRA FF  Replace ..
DESCRIPTION:
 1>Patient ID Extra FF
EDIT Option:
READ ACCESS: SHARKPONDFLY&#sharkpondfly  Replace
WRITE ACCESS: SHARKPONDFLY&#sharkpondfly  Replace
First Print FIELD: NAME://
  Then Print PATIENT FIELD: NAME_"^";X// 
  Then Print PATIENT FIELD: FMP_"^";X// 
  Then Print PATIENT FIELD: SPONSOR SSN_"^";X// 
  Then Print PATIENT FIELD: PATIENT SSN_"^";X// 
  Then Print PATIENT FIELD: `_"NUMBER_"^";X// // 
  Then Print PATIENT FIELD: PATIENT IDENTIFIER_"^";X
  Then Print PATIENT FIELD: PATIENT VALIDATION FLAG_"^";X
  Then Print PATIENT FIELD: RA DATE TIME(DATE VALIDATION FLAG UPDATED)_";X
  Then Print PATIENT FIELD: DEERS ADDRESS UPDATED_"^";X
  Then Print PATIENT FIELD: // 
Then Print FIELD: RA DATE TIME(APPOINTMENT DATE/TIME)_";X
Then Print FIELD: `_"NUMBER_"^";X// 
Then Print FIELD: APPOINTMENT STATUS_"^";X  Replace
Then Print FIELD: CLINIC//  CLINIC
Then Print FIELD:
Heading: @@//
Footnote:
Store Print logic in Template: GS CCC PT ID EXTRA FF//
```



Key Points Recap

- ADM captures and reports Encounter Services
- Interface Error Reports:
 - 1.
 - 2.
 - 3.
- Coding Table Update Coordination:
 - 1.
 - 2.
- SADR Review Tool - DQ “Tune-Up”
 - 1.
 - 2.
 - 3. If you are interest in the SADR Review Tool, Contact Me
- Homework...





Interface Error Reporting

Homework...



ADM Interface Errors

ADM Errors FY 06	Total
ERR: 209 Appt_status null or missing. (AHTLA Completed Encounter with change to Admin in CHCS EOD)	118
ERR: 222 Disposition missing based on status. (No-Show then changed to Kept)	60
ERR: 240 Found E&M code where not allowed. (Cancelled with Encounter Coding still in record)	14
ERR: 243 Ambulatory flag set where not allowed.	1
ERR: 251 Disposition Type does not match Patient Status (Change DC to Release w/o Limitations)	38
ERR: 253 No provider associated with a CPT code. (New as of June 2005)	3
ERR: 254 Injury Related data missing (HIPAA Injury Related data)	1
ERR: 257 Supervising Provider is required. (New as of June 2005) Warning 457: Required Supervising Provider not entered in AHLTA	76 1000+
Grand Total	311

- **ADM Interface Error Report lists key elements to facilitate reconciliation:**

- Coordinate reconciliation coordination with responsible Clinic Staff
- Errors prevent SADR from being created
- Warnings may impact billable encounters
- 457 Warnings - Will now be included EAS SADR Extract (as of July 2006)



CCE Interface Errors

26 May 2006@1837	Personal Data - Privacy Act of 1974	107	ADM
	CCE INTERFACE ERROR		
	From: 01 Apr 2006@0000 Thru:		
=====	=====	=====	=====
DIVISION: WOMACK AMC FT BRAGG NC			
Invalid CPT code: 90784			
02 Apr 2006@1916	30 Dec 2005@1752		
Invalid CPT code: J7616			
13 Apr 2006@1341	30 Mar 2006@1530	WFM-TEAM HU	
Invalid Secondary Provider Role			8145642
26 Apr 2006@0538	22 Mar 2006@1000	REFRACTIVE EYE CTR	BBDQ
Invalid patient IEN: 807544			8122973
26 Apr 2006@1212	26 Mar 2003@0850	GYNECOLOGY APV	BCB5
Invalid Secondary Provider 18510			4325381
04 May 2006@1403	25 Apr 2006@0900	WFM-TEAM DUTY	BGAA
Injury Cause Code is missing			8235808
22 May 2006@1726	30 Nov 2005@1930	AMIC CL	BIAB
Injury Date is missing			7714791
25 May 2006@1313	22 May 2006@1310	WFM-TEAM DUTY	BGAA
Modifier 27 is not valid for code 99212			8337540
05 Apr 2006@1923	03 Apr 2006@1100	RHC TEAM 2	BGAR
Dx/Priority mismatch for 90645			8157628

- 2005 Encounter correctly coded in the CCE in 2006, but rejected by ADM. ADM only maintains the current year code tables
- Invalid Patient IEN, due to possible merge in CHCS
- Ensure "Billable" encounters pending CCE Review are complete prior to CHCS Table Updates



Write-Back Errors

WB ERRORS BY DESCRIPTION	
1	Count of APPT_IEN
2	EXCEPTION_TEXT
3	Duplicate ICD_DIAGNOSIS_PRIORITYs are not allowed.
4	Wamload Failure - Unable to load retruned XML into XML.DOM
5	NA
6	EM_DIAGNOSIS_PRIORITY cannot be set until ICD9s are added.
7	At least 1 ICD9 code must be present.
8	'90782' is not a valid value for CPT4 CODE. '90782' cannot be found in the 'CPT4' code reference.
9	'V58.3' is not a valid value for ICD CODE. 'V58.3' cannot be found in the 'ICD9' code reference.
10	An E&M code has not been entered.
11	CPT4_DIAGNOSIS_PRIORITY cannot be set until ICD9s are added.
12	'5' is not a valid value for ICD-ICD_DIAGNOSIS_PRIORITY. Valid values must be in 1 or 2 or 3 or 4 or U.
13	'V24' is not a valid value for ICD CODE. 'V24' cannot be found in the 'ICD9' code reference.
14	'V58.30' is not a valid value for ICD CODE. 'V58.30' cannot be found in the 'ICD9' code reference.
15	A disposition has not been entered.
16	'6' is not a valid value for ICD-ICD_DIAGNOSIS_PRIORITY. Valid values must be in 1 or 2 or 3 or 4 or U.
17	'345.9' is not a valid value for ICD CODE. '345.9' cannot be found in the 'ICD9' code reference.
18	'J2050' is not a valid value for CPT4 CODE. 'J2050' cannot be found in the 'CPT4' code reference.
19	'V72.1' is not a valid value for ICD CODE. 'V72.1' cannot be found in the 'ICD9' code reference.
20	'V72.1.1' is not a valid value for ICD CODE. 'V72.1.1' cannot be found in the 'ICD9' code reference.
21	EM_DIAGNOSIS_PRIORITY: 12 does not conform to ICD_DIAGNOSIS_PRIORITYs: 11.
22	EM_DIAGNOSIS_PRIORITY: 12 does not conform to ICD_DIAGNOSIS_PRIORITYs: 1.
23	'90799' is not a valid value for CPT4 CODE. '90799' cannot be found in the 'CPT4' code reference.
24	'790.9' is not a valid value for ICD CODE. '790.9' cannot be found in the 'ICD9' code reference.
25	EM_DIAGNOSIS_PRIORITY: 123 does not conform to ICD_DIAGNOSIS_PRIORITYs: 10.
26	'V58.32' is not a valid value for ICD CODE. 'V58.32' cannot be found in the 'ICD9' code reference.
27	'519.1' is not a valid value for ICD CODE. '519.1' cannot be found in the 'ICD9' code reference.
28	'648.4' is not a valid value for ICD CODE. '648.4' cannot be found in the 'ICD9' code reference.
29	'7' is not a valid value for ICD-ICD_DIAGNOSIS_PRIORITY. Valid values must be in 1 or 2 or 3 or 4 or U.
30	'238.7' is not a valid value for ICD CODE. '238.7' cannot be found in the 'ICD9' code reference.
31	'A4790' is not a valid value for CPT4 CODE. 'A4790' cannot be found in the 'CPT4' code reference.
32	'493.90' is not a valid value for ICD CODE. '493.90' cannot be found in the 'ICD9' code reference.
33	Total

- Providers/Staff must update Favorites Lists and Personal Templates to the new ICD/CPT Codes
- ADM will reject ICD-9 Inpatient Procedure codes
- Trouble Ticket submitted for #1 Error

WB ERRORS - SUMMARY	
1	Count of APPT_IEN
2	EXCEPTION_TEXT
3	APPT MO
4	Jun-06
5	Jul-06
6	Aug-06
7	Sep-06
8	Oct-06
9	Grand Total
10	180
11	103
12	258
13	471
14	588
15	1600



Questions?

